

**STATE OF FLORIDA
APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**
(Section 106.021(1), F.S.)

(PLEASE TYPE)

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2009 DEC -4 PM 3:05

PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

CHECK APPROPRIATE BOX:

Original Appointment Deputy Treasurer Reappointment of Treasurer Secondary Depository

Name of Candidate

GEORGES WILLIAM

1. Address (include post office box or street, city, state, zip code)

4584 NE 2ND AVE, MIAMI FL 33137

Telephone (optional)

305-300-1883

2. Party (**Partisan candidates only**)

None Partisan

3. Office (add district, circuit or group number)

DISTRICT 5 Commissioner

I have appointed the following person to act as my

Campaign Treasurer

Deputy Treasurer

4. Name of Treasurer or Deputy Treasurer

SHIRLEY CARRIE

5. Mailing Address (If post office box or drawer add street address)

17760 SW 112 CT

6. Telephone

305-205-9983

7. City

MIAMI

8. County

DADE

9. State

FL

10. Zip Code

33157

I have designated the following named bank as my

Primary Depository

Secondary Depository

11. Name of Bank

BANK OF AMERICA

12. Street Address

5000 BISCAYNE BLVD

13. City

MIAMI

14. County

DADE

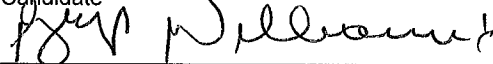
15. State

FL

16. Zip Code

33137

17. Signature of Candidate



Date

12-04-09

Campaign Treasurer's Acceptance of Appointment

I, SHIRLEY CARRIE, do hereby accept the appointment as

(Please Print or Type)

Campaign Treasurer

Deputy Treasurer

for the campaign of

GEORGES WILLIAM

who is seeking nomination or election as a

COMMISSIONER

candidate to the office of

(Party)

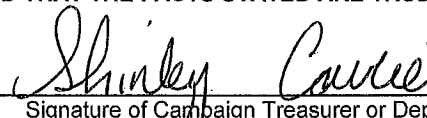
CITY OF MIAMI Commission, As a duly registered voter in DADE

DISTRICT 5

County, Florida, I am qualified to accept this appointment.

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING CAMPAIGN TREASURER'S
ACCEPTANCE OF APPOINTMENT AND THAT THE FACTS STATED ARE TRUE.**

12/4/09
Date


Signature of Campaign Treasurer or Deputy Treasurer

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CITY CLERK
CITY OF MIAMI, FL

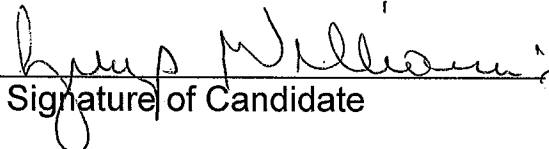
**STATEMENT OF
CANDIDATE**

(Section 106.023, F.S.)

(Please Type)

I, GEORGES WILLIAM,
candidate for the office of MIAMI CITY COMMISSIONER, DISTRICT 5 ;
have received, read and understand the requirements of Chapter 106,
Florida Statutes.

X


Signature of Candidate

12-04-09
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).

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AFFIDAVIT OF CANDIDATE

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CITY OF MIAMI, FLORIDA

PRISCILLA A. THOMPSON
CITY CLERK
CITY OF MIAMI, FL

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)

Georges William (hereinafter "affiant"), being first duly sworn, deposes and says:

1. My name is Georges William.

2. For those candidates seeking the office of Mayor, please check the appropriate subsection (a) below. Those candidates seeking the office of Commissioner please check and fill in the blank in subsection (b) below:

(a) I am offering myself as a candidate for the office of Mayor of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the City of Miami for the duration of my term of office.

(b) I am offering myself as a candidate of the office of Commissioner in District Number 5 of the City of Miami, Florida. If elected, I fully understand that I must maintain an actual and real residence within the district for the duration of my term of office.

3. I have resided in the City of Miami for a minimum of one year before qualifying if applying for Mayor, and one year in the district if applying for the Commission, and I am a registered voter and a duly qualified elector of the City of Miami, Florida, presently registered to vote in precinct No. 5.

I presently reside at the following address (must include zip code):

195 NE 46 ST UNIT 1 MIAMI FLORIDA 33137, which is my legal address, and I have resided continually at said address from the 3rd day of DEC 2005 to the present.

4. Immediately prior to residing at the above-stated address, I have resided at the hereinbelow listed addresses for the cited periods of time (list hereinbelow all addresses at which you have resided for the past five years, as well as the length of time at each address):

Prior Addresses

8106 NE 12 AVE MIAMI FL 33138

For the Period

1988 - 2005

5. In addition to the residence that I have listed as my present address, I also reside at the following listed addresses on a temporary basis as a secondary domicile or domiciles:

8100 NE 12 AVE MIAMI FLORIDA 33138

6. Affiant's spouse resides at the following address: (must include city, state and zip code)

N/A

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7. Affiant's minor children reside at the following address: (must include city, county and zip code)

N/A

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CITY CLERK
CITY OF MIAMI, FL

8. At the present time, affiant (is) (is not) registered to vote in any city, county or state other than as stipulated in subparagraph 3 above.

9. Name and business address of affiant's employer:

GEORGES WILLIAM ENTERPRISES REAL/ESTATE
4584 NE 2 AVE MIAMI FL 33137

10. Affiant's occupation: MANAGER

11. Affiant has been employed in the above-cited capacity for the following period of time:

27 YEARS

(Note: In the event the occupation of affiant has been for a period of less than one year, or the employment period with the same employer has been for a period of less than one year, affiant shall give the name(s) and address(es) of his/her employer(s) and occupation(s) for the period of one year prior to the date of this affidavit).

N/A

12. Affiant represents that he/she (is) (is not) currently holding another elective or appointive office – whether city, county or municipal – the term of which or any part thereof runs concurrently with that of the office he/she seeks, and that he/she has resigned from any office from which he/she is required to resign pursuant to F.S.99.012 and/or the City of Miami Charter.

13. Affiant represents that, as of this date, he/she (is) (is not) seeking to qualify for public office which is currently held by an officer who has authority to appoint, employ, promote, or otherwise supervise him/her and who has qualified as a candidate for reelection to that office. (Note: If affiant is an employee of the City of Miami (other than city manager, city attorney, independent auditor general or city clerk) or member of a city board of the City of Miami, Florida (other than a city commissioner or mayor), affiant in the case of an employee shall take a leave of absence, without pay from his/her employment during the period in which affiant is seeking election to public office or in the case of a board member such member shall resign and such leave of absence or resignation to be effective upon whichever occurs first:

- (a) such employee or board member receives contributions or makes expenditures, or gives her or his consent for any other person to receive contributions or make expenditures, with a view to bringing about his or her nomination or election to public office; or
- (b) at the time such employee or board member appoints a campaign treasurer and designates a primary depository; or
- (c) at the time such employee or board member files qualification papers and subscribes to a candidates oath as required by law.

The definition of "city board" is found in Section 2-882 of the Miami City Code.

14. Affiant's campaign headquarters address and telephone number:

4584 NE 2 AVE MIAMI FL 33137

Affiant's campaign treasurer's name:

SHIRLEY CARRIE

*Affiant's campaign treasurer's address:

17760 SW 112 CT MIAMI FL 33157

Telephone numbers: (work) 305-205-9983

(home) _____

*[A Campaign Treasurer or Deputy Treasurer shall be a registered voter in the State of Florida.]

15. Affiant represents that, if elected, he she shall serve in the elective office to which he she seeks election.

16. Following is the exact way in which affiant would like to have his/her name printed on the official ballot:

GEORGES WILLIAM

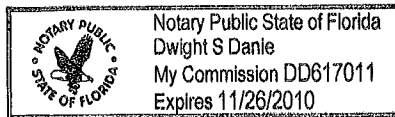
SIGNED THIS 4th DAY OF DEC, 2009

George William
AFFIANT

BEFORE ME, the undersigned authority, personally appeared Georges William, who, after first being duly sworn, deposes and states that he executed the foregoing to the best of his knowledge and belief.

D S Danie
CITY CLERK,
CITY OF MIAMI, FLORIDA

(SEAL)



_____ Did take an oath

Produced identification

Type of identification produced: Passport # 207 129 662

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CITY CLERK
CITY OF MIAMI, FL

FORM 1

STATEMENT OF

2008

FINANCIAL INTERESTS

Please print or type your name, mailing address, agency name, and position below:

LAST NAME -- FIRST NAME -- MIDDLE NAME :
WILLIAM GEORGES

MAILING ADDRESS :
195 NE 46TH, STREET

CITY : MIAMI ZIP : 33137 COUNTY : DADE

NAME OF AGENCY :
CITY OF MIAMI DADE COUNTY

NAME OF OFFICE OR POSITION HELD OR SOUGHT :
CITY OF MIAMI COMMISSIONER, DISTRICT 5

You are not limited to the space on the lines on this form. Attach additional sheets, if necessary.
CHECK ONLY IF CANDIDATE OR NEW EMPLOYEE OR APPOINTEE

FOR OFFICE USE ONLY:

ID Code

ID No.

Conf. Code

P. Req. Code

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CITY CLERK
CITY OF MIAMI, FL

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****BOTH PARTS OF THIS SECTION MUST BE COMPLETED****

DISCLOSURE PERIOD:

THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (check one):

DECEMBER 31, 2008 OR SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: _____

MANNER OF CALCULATING REPORTABLE INTERESTS:

THE LEGISLATURE ALLOWS FILERS THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). PLEASE STATE BELOW WHETHER THIS STATEMENT REFLECTS EITHER (check one):

COMPARATIVE (PERCENTAGE) THRESHOLDS OR DOLLAR VALUE THRESHOLDS

PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person]

NAME OF SOURCE OF INCOME	SOURCE'S ADDRESS	DESCRIPTION OF THE SOURCE'S PRINCIPAL BUSINESS ACTIVITY
REAL ESTATE	4584 NE 2ND, AVE MIAMI FL 33137	REAL ESTATE MANAGEMENT

PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person]

NAME OF BUSINESS ENTITY	NAME OF MAJOR SOURCES OF BUSINESS' INCOME	ADDRESS OF SOURCE	PRINCIPAL BUSINESS ACTIVITY OF SOURCE
N/A	N/A	N/A	N/A

PART C -- REAL PROPERTY [Land, buildings owned by the reporting person]

4500 NE 2ND AVE, MIAMI FL 33137
190 NE 46TH STREET, MIAMI FL 33137
8100 NE 12TH, AVE MIAMI FL 33138
LAND - CENTRAL FLORIDA

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2.

INSTRUCTIONS on who must file this form and how to fill it out begin on page 3.

OTHER FORMS you may need to file are described on page 6.

PART D — INTANGIBLE PERSONAL PROPERTY [Stocks, bonds, certificates of deposit, etc.]	
TYPE OF INTANGIBLE	BUSINESS ENTITY TO WHICH THE PROPERTY RELATES
STOCKS	CHARLES SCHWAB

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 CITY CLERK
 CITY OF MIAMI, FL

PART E — LIABILITIES [Major debts]	
NAME OF CREDITOR	ADDRESS OF CREDITOR
COASTAL STATES MORTGAGE CORP	600 CORPORATE DRIVE - SUITE 620, FORT LAUDERDALE, FL 33334
ONE WEST	PO BOX 78826, PHOENIX, AZ 8826

PART F — INTERESTS IN SPECIFIED BUSINESSES [Ownership] or positions in certain types of businesses]			
	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2	BUSINESS ENTITY # 3
NAME OF BUSINESS ENTITY	GEORGES WILLIAM ENTERPRISES		
ADDRESS OF BUSINESS ENTITY	4584 NE 2ND AVE, MIAMI, FL 33137		
PRINCIPAL BUSINESS ACTIVITY	REAL ESTATE MANAGEMENT		
POSITION HELD WITH ENTITY	OWNER / MANAGER		
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	YES		
NATURE OF MY OWNERSHIP INTEREST	OWNER / DIRECTOR		

IF ANY OF PARTS A THROUGH F ARE CONTINUED ON A SEPARATE SHEET, PLEASE CHECK HERE

SIGNATURE (required):  DATE SIGNED (required): 12-04-09

FILING INSTRUCTIONS:

WHAT TO FILE:
 After completing all parts of this form, including signing and dating it, send back only the first sheet (pages 1 and 2) for filing.

If you have nothing to report in a particular section, you must write "none" or "n/a" in that section(s).

Facsimiles will not be accepted.

NOTE:
MULTIPLE FILING UNNECESSARY:
 Generally, a person who has filed Form 1 for a calendar or fiscal year is not required to file a second Form 1 for the same year. However, a candidate who previously filed Form 1 because of another public position must at least file a copy of his or her original Form 1 when qualifying.

WHERE TO FILE:
 If you were mailed the form by the Commission on Ethics or a County Supervisor of Elections for your annual disclosure filing, return the form to that location.

Local officers/employees file with the Supervisor of Elections of the county in which they permanently reside. (If you do not permanently reside in Florida, file with the Supervisor of the county where your agency has its headquarters.)

State officers or specified state employees file with the Commission on Ethics, P.O. Drawer 15709, Tallahassee, FL 32317-5709; physical address: 3600 Maclay Boulevard, South, Suite 201, Tallahassee, FL 32312.

Candidates file this form together with their qualifying papers.

To determine what category your position falls under, see the "Who Must File" Instructions on page 3.

WHEN TO FILE:
Initially, each local officer/employee, state officer, and specified state employee must file **within 30 days** of the date of his or her appointment or of the beginning of employment. Appointees who must be confirmed by the Senate must file prior to confirmation, even if that is less than 30 days from the date of their appointment.

Candidates for publicly-elected local office must file at the same time they file their qualifying papers.

Thereafter, local officers/employees, state officers, and specified state employees are required to file by July 1st following each calendar year in which they hold their positions.

Finally, at the end of office or employment, each local officer/employee, state officer, and specified state employee is required to file a final disclosure form (Form 1F) within 60 days of leaving office or employment.

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CITY CLERK
CITY OF MIAMI, FL

LOYALTY OATH
CANDIDATES WITH NO PARTY AFFILIATION
(Sections 876.05-876.10, Florida Statutes)

STATE OF FLORIDA

DADE

COUNTY

(PLEASE PRINT)

I,

GEORGES

First Name

Middle Name/Initial

WILLIAM

Last Name

a citizen of the State of Florida and of the United States of America, . . . and a candidate for public office . . . do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

OATH OF CANDIDATE

(Section 99.021, Florida Statutes)

I, GEORGES WILLIAM

(PLEASE PRINT NAME AS YOU WISH IT TO APPEAR ON THE BALLOT --- NAME MAY NOT BE CHANGED AFTER THE END OF QUALIFYING)

am a candidate for the office of CITY OF MIAMI, 5, _____,
(office) (district) (circuit)

_____ I am a qualified elector of DADE County, Florida. I am qualified
(group)

under the Constitution and the Laws of Florida to hold the office to which I desire to be nominated or elected. I have qualified for no other public office in the state, the term of which office or any part thereof runs concurrent with the office I seek; and I have resigned from any office from which I am required to resign pursuant to Section 99.012, Florida Statutes.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING LOYALTY OATH AND OATH OF CANDIDATE AND THAT THE FACTS STATED IN EACH ARE TRUE.

SIGN HERE



Georges William
Signature of Candidate

195 NE 46TH, STREET - UNIT 1

Mailing Address

786-360-6013

Day Phone

305-576-7769

Fax Number

MIAMI

City

FL

State

33137

Zip Code

12/4/2009

Date Signed

LOYALTY OATH

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CITY CLERK
CITY OF MIAMI, FL

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)
CITY OF MIAMI)
(Please Print) *GW*

I, Georges Will _____ William
First Name Middle Initial Last Name

a citizen of the State of Florida and of the United States of America, ... and a candidate for public office... do hereby solemnly swear or affirm that I will support the Constitution of the United States and of the State of Florida.

Georges William
Signature of Candidate

OATH OF CANDIDATE
OFFICE OF CITY OF MIAMI COMMISSIONER

Before me, an officer authorized to administer oaths, personally appeared

Georges William
(Please print name as you wish it to appear on ballot)

who being sworn, says, he/she is a candidate for the office of City of Miami Commissioner, District 5; that he/she is a qualified elector of the City of Miami, Florida; that he/she is qualified under the Constitution, the Laws of Florida, and City of Miami Charter to hold the office to which he/she desires to be elected; that he/she has taken the oath required by ss. 876.05 – 876.10, Florida Statutes; that he/she has qualified for no other public office in the State, the term of which office or any part thereof runs concurrent with that of the office he/she seeks; and that he/she has resigned or taken a leave of absence from any office from which he/she is required to resign or take a leave of absence, pursuant to Section 99.012, Florida Statutes.

Georges William
Signature of Candidate

195 NE 46 St #1 Miami FL 33137
Address

Miami, FL 33137
City State ZIP Code

The Loyalty Oath and the above Oath of Candidate are sworn to

and subscribe before me this 4th day of December, 2009.

(Signature of Officer Administering the Oath, or of designated Notary Public – State of Florida) *Dwight Dan*

Print, Type, or Stamp Commissioned Name of designated Notary Public) Dwight Dan

Personally Known OR Produced Identification Type of Identification-Produced Passport 207129642

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CITY CLERK
CITY OF MIAMI, FL

Voter ID Card
Miami-Dade County, FL

MIAMI-DADE COUNTY
TARJETA DE IDENTIFICACION DEL ELECTOR
Condado de Miami-Dade, FL

00785272
GEORGES WILLIAM
195 NE 46TH ST #1
MIAMI FL 33137

Kat Idantikasyon Voté
Kofite Miami-Dade, FL

ISSUED
EMITIDA
ENPRIME
04/13/05

Georges William

Signature of Voter | Firma del elector | Siyati Voté


Registration No. Núm. de inscripción Nim. Enskripsyon	Identification Data Datos de identificación Enfo. Idantikasyon	Precinct No. Núm. del recinto Nim. Biwo Vót
00785272	M B 04/24/53	518
Registration Date Fecha de inscripción Dat Enskripsyon	Party Affiliation Afilación partidista Parti Polítik	
09/05/79	REP	

Polling Place | Centro de votación | Lokal Biwo Vót
CHURCH OF GOD PROPHECY
4528 NW 1 AVE
Lester Sola
Supervisor of Elections | Supervisor de Elecciones | Sipevize Eleksyon

Ud. es elegible para votar por los representantes de los distritos enumerados abajo.
W. elijib pou w. vote pou reprezantan ki nan distri ki eltri anba la yo.

Congress Congreso Kongre	State Senate Senado Estatal Sená Eta a	State House Cámara Estatal Lacham Eta a
017	039	109
County Commission Comisión del Condado Komisyon Konte	School Board Junta Escolar Asanble Edikasyon	Community Council Consejo Comunitario Konsèy Kominoté
03	02	

Municipal | Municipal | Minisipal
MI05



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CITY OF MIAMI, FL

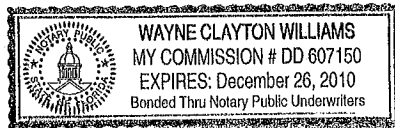
Georges William
195 NE 46th, Street – Unit 1
Miami, FL 33137

Friday, December 04, 2009

I, Georges William Candidate for the City of Miami Commissioner District 5,
DO HEREBY swear that I reside at 195 NE 46th, Street unit 1 Miami FL 33137,
for over 1 year, qualifying residency in the area of District 5.

Sincerely

Georges William
Georges William



*signature of Georges
William witnessed this
4th day of December, 2009
in Miami FL*

W. Clayton Williams
W. Clayton Williams

STREET ID: 076311 IN USE: YES

--HOUSE RANGE--	QUAD	NAME	TYPE	--SIDE--
0101 - 0199	NW 46		ST	1 ODD
FACE:	S	PRIMARY ZONE:		EMPOWERMENT ZONE: N
ZIP CODE:	331272621	SD1 ZONE:		LATIN QUATERS: N
CENSUS TRACT:	2202	SD2 ZONE:		VOTING DISTRICT: 05
CENSUS BLOCK:	2015	DDRI ZONE:	N	
FIRE 901 ZONE:	1163	SEOPWDRI ZONE:	N	
FIRE SFBC ZONE:	3A	HIST PRESVN DIST:	N	
NBHD CODE:	02	SCENIC CORRIDOR:	N	
SUB NBHD CODE:	01	PEDESTRIAN PATHWAY:	N	
SOLID WASTE ROUTE:	109	OMNI TAX DISTRICT:	N	
TRASH ROUTE:	00	DDA DISTRICT:	N	
STREET CLEAN ROUTE:	000	CD TARGET AREA:	01	

NEXT STREET:

HOUSE NO:	QUAD:	NAME:	TYPE:	
ACTION: 1-CONTINUE				ACTION: 01 XMIT:

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CITY CLERK
CITY OF MIAMI, FL

GEORGE'S William CAMPAIGN
4584 NE 2 AVE
MIAMI FL 33138

0991
63-27631 FL
995

DATE 12-4-09

PAY TO THE ORDER OF

CITY OF MIAMI

\$ 682.00

Six Hundred Eighty Two

DOLLARS

100

Bank of America



FOR REGISTRY

George Williams

⑈00099⑈ ⑆063100277⑆ 229032455750⑈

GUARDIAN © SAFETY Headband Closure BA

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CITY CLERK
CITY OF MIAMI, FL



City of Miami
OFFICIAL RECEIPT

No. 339009

\$ 682.⁰⁰ Sales Tax \$ — Total \$ 682.⁰⁰

Date: 12/04/09

Six hundred and eighty-two /100 Dollars

Received from: Georges William Campaign

Address: 4584 N.E. 2 Ave., Miami, FL 33137

For: Qualifying Fee Reference No: CR# 0991

This Receipt not VALID unless dated, filled in and signed by authorized employee of department or division designated hereon and until the City has collected the proceeds of any checks tendered as payment herein.

By: XI. Ewan

Department: City Clerk

Division: _____

C FN/TM 402 Rev. 03/03

Distribution: White - Customer; Canary - Finance; Pink - Issuing Department

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